

(Official Form 1) (12/03)

FORM B1 United States Bankruptcy Court Western District of Michigan		Voluntary Petition															
Name of Debtor (if individual, enter Last, First, Middle): PRATT, ISAAC DARYL		Name of Joint Debtor (Spouse) (Last, First, Middle): PRATT, ALCIA CHRISTINE															
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names): fka Alycia C. James															
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): 5527		Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): 3055															
Street Address of Debtor (No. & Street, City, State & Zip Code): 4593 TABOR ROAD NW COMSTOCK PARK, MI 49321		Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 4593 TABOR ROAD NW COMSTOCK PARK, MI 49321															
County of Residence or of the Principal Place of Business: Kent		County of Residence or of the Principal Place of Business: Kent															
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):															
Location of Principal Assets of Business Debtor (if different from street address above):																	
Information Regarding the Debtor (Check the Applicable Boxes)																	
Venue (Check any applicable box) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.																	
Type of Debtor (Check all boxes that apply) <input checked="" type="checkbox"/> Individual(s) <input type="checkbox"/> Railroad <input type="checkbox"/> Corporation <input type="checkbox"/> Stockbroker <input type="checkbox"/> Partnership <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Other _____ <input type="checkbox"/> Clearing Bank		Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Sec. 304 - Case ancillary to foreign proceeding															
Nature of Debts (Check one box) <input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business		Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.															
Chapter 11 Small Business (Check all boxes that apply) <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101 <input type="checkbox"/> Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)																	
Statistical/Administrative Information (Estimates only) <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY															
Estimated Number of Creditors <table style="width:100%; text-align: center;"> <tr> <td>1-15</td><td>16-49</td><td>50-99</td><td>100-199</td><td>200-999</td><td>1000-over</td> </tr> <tr> <td><input type="checkbox"/></td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>			1-15	16-49	50-99	100-199	200-999	1000-over	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
1-15	16-49		50-99	100-199	200-999	1000-over											
<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
Estimated Assets <table style="width:100%; text-align: center;"> <tr> <td>\$0 to \$50,000</td><td>\$50,001 to \$100,000</td><td>\$100,001 to \$500,000</td><td>\$500,001 to \$1 million</td><td>\$1,000,001 to \$10 million</td><td>\$10,000,001 to \$50 million</td><td>\$50,000,001 to \$100 million</td><td>More than \$100 million</td> </tr> <tr> <td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>		\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million										
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Estimated Debts <table style="width:100%; text-align: center;"> <tr> <td>\$0 to \$50,000</td><td>\$50,001 to \$100,000</td><td>\$100,001 to \$500,000</td><td>\$500,001 to \$1 million</td><td>\$1,000,001 to \$10 million</td><td>\$10,000,001 to \$50 million</td><td>\$50,000,001 to \$100 million</td><td>More than \$100 million</td> </tr> <tr> <td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>		\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million										
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										

VOLUNTARY PETITION

(Official Form 1) (12/03)

FORM B1, Page 2

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE	
Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)			
Location Where Filed: None		Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: None		Case Number:	Date Filed:
District:		Relationship:	Judge:
Signatures			
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.		Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.	
X <u>/s/ ISAAC DARYL PRATT</u> Signature of Debtor ISAAC DARYL PRATT X <u>/s/ ALYCIA CHRISTINE PRATT</u> Signature of Joint Debtor ALYCIA CHRISTINE PRATT Telephone Number (If not represented by attorney) <u>September 28, 2005</u> Date		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. X <u>/s/ Mary Saur Cohn</u> 9/28/05 Signature of Attorney for Debtor(s) Date	
Signature of Attorney X <u>/s/ Mary Saur Cohn</u> Signature of Attorney for Debtor(s) Mary Saur Cohn (P44602) Printed Name of Attorney for Debtor(s) Mary Saur Cohn, PLLC Bankruptcy Law Partners Firm Name 3655 Alpine Ave. NW, Suite 134 Address Comstock Park, MI 49321-9744 (616) 647-9028 Telephone Number September 28, 2005 Date		Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No	
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.		Signature of Non-Attorney Petition Preparer I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document. Printed Name of Bankruptcy Petition Preparer Social Security Number (Required by 11 U.S.C. § 110(c).) Address Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document: If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.	
X _____ Signature of Authorized Individual _____ Printed Name of Authorized Individual _____ Title of Authorized Individual _____ Date		X _____ Signature of Bankruptcy Petition Preparer _____ Date A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.	

UNITED STATES BANKRUPTCY COURT

PRE-FILING NOTICE TO INDIVIDUAL CONSUMER DEBTOR

The purpose of this notice is to acquaint you with the four chapters of the Federal Bankruptcy Code under which you may file a bankruptcy petition. The bankruptcy law is complicated and not easily described. Therefore, you should seek the advice of an attorney to learn of your rights and responsibilities under the law should you decide to file a petition with the court. **Neither the judge nor the court's employees may provide you with legal advice.**

CHAPTER 7: LIQUIDATION: \$209

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts.
2. Under Chapter 7 a trustee takes possession of all your property. You may claim certain of your property as exempt under governing law. The trustee then liquidates the property and uses the proceeds to pay your creditors according to priorities of the Bankruptcy Code.
3. The purpose of filing a Chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, your discharge may be denied by the court, and the purpose for which you filed the bankruptcy petition will be defeated.
4. Even if you receive a discharge, there are some debts that are not discharged under the law. Therefore, you may still be responsible for such debts as certain taxes and student loans, alimony and support payments, debts fraudulently incurred, debts for willful and malicious injury to a person or property, and debts arising from a drunk driving judgment.
5. Under certain circumstances you may keep property that you have purchased subject to a valid security interest. Your attorney can explain the options that are available to you.

CHAPTER 13: REPAYMENT OF ALL OR PART OF THE DEBTS OF AN INDIVIDUAL WITH REGULAR INCOME: \$194

1. Chapter 13 is designed for individuals with regular income who are temporarily unable to pay their debts but would like to pay them in installments over a period of time. You are only eligible for Chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
2. Under Chapter 13 you must file a plan with the court to repay your creditors all or part of the money that you owe them, using your future earnings. Usually the period allowed by the court to repay your debts is three years, but not more than five years. Your plan must be approved by the court before it can take effect.
3. Under Chapter 13, unlike Chapter 7, you may keep all your property, both exempt and non-exempt, as long as you continue to make payments under the plan.
4. After completion of payments under your plan, your debts are discharged except alimony and support payments, certain kinds of taxes owed for less than three years, and long term secured obligations.

CHAPTER 11: REORGANIZATION: (\$839 FILING FEE)

Chapter 11 is designed primarily for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision for an individual to file a Chapter 11 petition should be reviewed with an attorney.

CHAPTER 12: FAMILY FARMER: (\$239 FILING FEE)

Chapter 12 is designed to permit family farmers to repay their debts over a period of time from future earnings and is in many ways similar to a Chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family owned farm.

DEBTOR'S ACKNOWLEDGMENT OF RECEIPT

I have received a copy of this notice.

9/28/2005

Date

/s/ ISAAC DARYL PRATT

Debtor

ISAAC DARYL PRATT

9/28/2005

Date

/s/ ALYCIA CHRISTINE PRATT

Co-Debtor

ALYCIA CHRISTINE PRATT

IN RE PRATT, ISAAC DARYL & PRATT, ALCYIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None". If additional space is needed in any category, attached a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions only in Schedule C - Property Claimed as Exempt.

Do not include interests in executory contracts and unexpired leases on the schedule. List them in Schedule G - Executory Contracts and Unexpired Leased.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property".

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking account	J	100.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, include audio, video, and computer equipment.		General household furniture and furnishings	J	2,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		General clothing and wearing apparel	J	1,000.00
7. Furs and jewelry.		Jewelry	J	250.00
8. Firearms and sports, photographic, and other hobby equipment.		Sports equipment	J	500.00
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	X			
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
13. Interests in partnerships or joint ventures. Itemize.	X			
14. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
15. Accounts receivable.	X			
16. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			

SCHEDULE B - PERSONAL PROPERTY

IN RE PRATT, ISAAC DARYL & PRATT, ALCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
18. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
19. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
21. Patents, copyrights, and other intellectual property. Give particulars.	X			
22. Licenses, franchises, and other general intangibles. Give particulars.	X			
23. Automobiles, trucks, trailers, and other vehicles and accessories.	X			
24. Boats, motors, and accessories.	X			
25. Aircraft and accessories.	X			
26. Office equipment, furnishings, and supplies.		Computer, desk, etc.	J	3,000.00
27. Machinery, fixtures, equipment, and supplies used in business.	X			
28. Inventory.	X			
29. Animals.	X			
30. Crops - growing or harvested. Give particulars.	X			
31. Farming equipment and implements.	X			
32. Farm supplies, chemicals, and feed.	X			
33. Other personal property of any kind not already listed. Itemize.	X			
TOTAL				7,350.00

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0 continuation sheets attached

(Include amounts from any continuation sheets attached.
Report total also on Summary of Schedules.)

SCHEDULE B - PERSONAL PROPERTY

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C," respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☒ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
							UNSECURED PORTION, IF ANY
Account No.							
			Value \$				
Account No.							
			Value \$				
Account No.							
			Value \$				
Account No.							
			Value \$				
Account No.							
			Value \$				

0 Continuation Sheets attached

Subtotal
(Total of this page)

(Complete only on last sheet of Schedule D) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C," respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS

(Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2)

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3), as amended by § 1401 of Pub L. 109-8.

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to a maximum of \$4,925* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to a maximum of \$2,225* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6)

☐ **Alimony, Maintenance, or Support**

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☒ **Taxes and Other Certain Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

* Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 Continuation Sheets attached

IN RE PRATT, ISAAC DARYL & PRATT, ALCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	TOTAL AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY
Account No.		J						
Internal Revenue Service 678 Front Street NW Grand Rapids, MI 49504								NOTICE
Account No.		J						
MICHIGAN DEPT. OF TREASURY 430 WEST ALLEGAN STREET LANSING, MI 48922								NOTICE
Account No.								
Account No.								
Account No.								
Account No.								

Sheet 1 of 1 Continuation Sheets attached to Schedule ESubtotal
(Total of this page)(Complete only on last sheet of Schedule E) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding unsecured claims without priority against the debtor or the property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C," respectively, in the column labeled "HWJC."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 0362 Advanced Radiology Services PC 3264 North Evergreen Dr. Suite 101 Grand Rapids, MI 49525		H	Medical		X		644.00
Account No. CBCS 4764 East Fulton, Suite 101 PO Box 1615 Grand Rapids, MI 49501-1615			Assignee or other notification for: Advanced Radiology Services PC				
Account No. 6202 American Credit Educators, LLC 2000 S. Colorado Blvd. Tower Onw, Suite 3300 Denver, CO 80222		H			X		300.95
Account No. 7739 Asset Acceptance Corp. ATTN: DEBT COLLECTOR, LEGAL 28405 Van Dyke Warren, MI 48093		H	Gateway Credit Card		X		2,504.99
Account No. Hurley State Bank PO Box 818 Gray, TN 37615			Assignee or other notification for: Asset Acceptance Corp.				
Subtotal (Total of this page)							3,449.94
(Complete only on last sheet of Schedule F) TOTAL (Report total also on Summary of Schedules)							

10 Continuation Sheets attached

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. National Arbitration Forum File No. FA0507000512174 PO Box 50191 Minneapolis, MN 55405-0191			Assignee or other notification for: Asset Acceptance Corp.				
Account No. 1030FACRAT AT&T Long Distance C/O Risk Management Alternatives PO Box 105816 Atlanta, GA 30348-5816		W	Telephone service		X		66.60
Account No. NCO Financial Systems Inc. PO Box 41457 Philadelphia, PA 19101-1457			Assignee or other notification for: AT&T Long Distance				
Account No. Risk Management Alternatives, Inc. 1500 Commerce Drive Mendota Heights, MN 55120-1025			Assignee or other notification for: AT&T Long Distance				
Account No. 8701 Bed Bath & Beyond C/O Certegy Payment Recovery Serv. PO Box 30272 Tampa, FL 33630-3272		W			X		25.00
Account No. Certegy Payment Recovery Services PO Box 30031 Tampa, FL 33630-3031			Assignee or other notification for: Bed Bath & Beyond				
Account No. 5894 Borgess Medical Center 1521 Gull Road Kalamazoo, MI 49048		W	Medical		X		156.00

Sheet 1 of 10 Continuation Sheets attached to Schedule FSubtotal
(Total of this page)**247.60**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Borgess Medical Center C/O Comprehensive Coll. Serv. PO Box 2503 East Lansing, MI 48826-2503			Assignee or other notification for: Borgess Medical Center				
Account No. 6073 Bronson Medical Group C/O United Collection Bureau 5620 Southwyck Blvd. Toledo, OH 43614		W	Medical		X		58.00
Account No. 2276 Capital One P.O. Box 85015 Richmond, VA 23285-5015		W	Credit card		X		676.03
Account No. 7908 Capital One P.O. Box 85015 Richmond, VA 23285-5015		H	Credit card		X		874.00
Account No. 5142 Centennial Wireless C/O E R Solutions, Inc. PO Box 9004 Renton, WA 98057-9004		W	Cell phone		X		367.05
Account No. E R Solutions, Inc. PO Box 5730 Hauppauge, NY 11788-0154			Assignee or other notification for: Centennial Wireless				
Account No. 2484 Champion Fitness C/O Credit Management Services PO Box 250218 Franklin, MI 48025		H	Club membership		X		460.00

Sheet 2 of 10 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page)

2,435.08

(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Credit Management Services 30600 Telegraph Rd., Ste. 4215 Bingham Farms, MI 48025			Assignee or other notification for: Champion Fitness				
Account No. Citizens Bank C/O JJ Marshall & Assoc. 6060 Collection Dr. Shelby Twp., MI 48316		H	Installment loan		X		7,626.00
Account No. Citizens Bank 328 S. Saginaw Flint, MI 48502			Assignee or other notification for: Citizens Bank				
Account No. 8305 Consumers Energy Box 201 Grand Rapids, MI 49501		W	Utilities		X		47.39
Account No. Consumers Energy C/O NCO Financial Systems PO Box 3500 Jackson, MI 49204-3500			Assignee or other notification for: Consumers Energy				
Account No. Consumers Energy C/O Midwestern Audit Services Inc. PO Box 1707 Troy, MI 48099-1707			Assignee or other notification for: Consumers Energy				
Account No. 0520 Enterprise Rent-A-Car 3375 Alpine Ave. NW Grand Rapids, MI 49544		H			X		374.27

Sheet 3 of 10 Continuation Sheets attached to Schedule FSubtotal
(Total of this page)**8,047.66**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 1346 Farook J. Kidwai MD PC 2815 Michigan Street NE Grand Rapids, MI 49506		H	Medical		X		45.00
Account No. Fingerhut PO Box 166 Newark, NJ 07101-0166		H	Merchandise		X		265.00
Account No. Fingerhut Credit Advantage 6250 Ridgewood Road St. Cloud, MN 56303			Assignee or other notification for: Fingerhut				
Account No. Fingerhut Credit Advantage C/O Midland Credit Mgt., Inc. 8875 Aero Dr., Suite 200 San Diego, CA 92123			Assignee or other notification for: Fingerhut				
Account No. 8059 Fitness Tech C/O ASF International PO Box 260360 Denver, CO 80226		W			X		250.00
Account No. 6474 Harris Publishing 360 B Street Idaho Falls, ID 83402		H	Magazine		X		89.00
Account No. 0003 JC Penney P.O. Box 960001 Orlando, FL 32896-0001		W	Credit card		X		382.83

Sheet 4 of 10 Continuation Sheets attached to Schedule FSubtotal
(Total of this page)**1,031.83**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Kalamazoo Anesthesiology PC 900 Peeler St., Suite A Kalamazoo, MI 49008		W	Medical		X		596.00
Account No. David W. McMorrow & Assoc. PLC 2700 Old Centre Portage, MI 49024			Assignee or other notification for: Kalamazoo Anesthesiology PC				
Account No. John D. Bradshaw PC PO Box 50431 Kalamazoo, MI 49005-0431			Assignee or other notification for: Kalamazoo Anesthesiology PC				
Account No. 3184 Lane Bryant PO Box 659728 San Antonio, TX 78265-9728		W	Credit card/clothing		X		30.74
Account No. Lane Bryant PO Box 182121 Columbus, OH 43218-2121			Assignee or other notification for: Lane Bryant				
Account No. 1960 Matchmaker International - GR C/O Monterey Financial Services, Inc. PO Box 2669 Carlsbad, CA 92018		W			X		970.63
Account No. Matchmaker International - GR 2450 44th St. SE, Ste. 205 Grand Rapids, MI 49512			Assignee or other notification for: Matchmaker International - GR				

Sheet 5 of 10 Continuation Sheets attached to Schedule FSubtotal
(Total of this page)**1,597.37**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.		H			X		
Matchmaker International - GR 2450 44th St. SE, Ste. 205 Grand Rapids, MI 49512							1,610.00
Account No.		H			X		
MCI PO Box 248 Gastonia, NC 28053							364.00
Account No.			Assignee or other notification for: MCI				
MCI Comm. 22001 Loudon County Pkwy. Ashburn, VA 20147							
Account No.		H			X		
Meijers 2929 Walker Ave. NW Grand Rapids, MI 49544							54.00
Account No. 0030		H	Medical		X		
Metropolitan Hospital 1919 Boston SE Grand Rapids, MI 49506							343.05
Account No.			Assignee or other notification for: Metropolitan Hospital				
Metropolitan Hospital C/O Alliance One PO Box 1963 Southgate, MI 48195-0963							
Account No. 0024		H	Medical		X		
Metropolitan Hospital 1919 Boston SE Grand Rapids, MI 49506							147.50

Sheet 6 of 10 Continuation Sheets attached to Schedule FSubtotal
(Total of this page)**2,518.55**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Alliance One Receivables Mgt. PO Box 3104 Southeastern, PA 19398-3104			Assignee or other notification for: Metropolitan Hospital				
Account No. 0513 Metropolitan Hospital PO Box 159 Grand Rapids, MI 49501-0159		H	Medical		X		1,170.50
Account No. Money Recovery Nationwide 801 S. Waverly Road Suite 100 Lansing, MI 48917			Assignee or other notification for: Metropolitan Hospital				
Account No. MRN/NCA PO BOX 13129 LANSING, MI 48901-3129			Assignee or other notification for: Metropolitan Hospital				
Account No. 9047 Michigan Pain Consultants PO Box 120070 Grand Rapids, MI 49512		H	Medical		X		325.90
Account No. 0398 OBGYN INC. - KALAMAZOO C/O Allied Collection Group PO Box 1799 Holland, MI 49422-1799		W	Medical		X		793.95
Account No. OBGYN PC 601 John St. Kalamazoo, MI 49007			Assignee or other notification for: OBGYN INC. - KALAMAZOO				

Sheet 7 of 10 Continuation Sheets attached to Schedule FSubtotal
(Total of this page)**2,290.35**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 0458 Olivet College Perkins 320 S. Main St. Olivet, MI 49076		H	Tuition		X		3,871.42
Account No. Olivet College Perkins C/O Williams & Fudge, Inc. PO Box 11590 Rock Hill, SC 29731-1590			Assignee or other notification for: Olivet College Perkins				
Account No. 8522 Orchard Bank HSBC Card Services PO Box 5222 Carol Stream, IL 60197-5222		W	Credit card		X		269.09
Account No. HSBC Card Services PO Box 80084 Salinas, CA 93912-0084			Assignee or other notification for: Orchard Bank				
Account No. 4290 People Magazine The Billing Center/Time Inc. PO Box 60001 Tampa, FL 33660-0001		W	Magazine		X		108.68
Account No. 8975 Publishers Clearing House PO Box 26301 Lehigh Valley, PA 18002-6301		H	Magazine		X		21.95
Account No. 6769 Quest Diagnostics Inc. 515 Michigan St. NE, Suite 101 Grand Rapids, MI 49503		H	Medical		X		49.42

Sheet 8 of 10 Continuation Sheets attached to Schedule FSubtotal
(Total of this page)**4,320.56**(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Quest Diagnostics C/O Russell Collection Agency PO Box 7009 Flint, MI 48507-0009			Assignee or other notification for: Quest Diagnostics Inc.				
Account No. 6616 SBC PO Box 5072 SAGINAW, MI 48605-5072		W	Telephone service		X		98.05
Account No. 0630 Specialized Card Services C/O Bankruptcy Law Partners 3655 Alpine Ave. NW, Ste. 134 Comstock Park, MI 49321		H	Credit card		X		400.00
Account No. Spectrum Health P.O. Box 2127 Grand Rapids, MI 49501-2127		H	Medical				1,473.56
Account No. 61st District Court Case No. 05-GC-2520 180 Ottawa Ave. NW Grand Rapids, MI 49503			Assignee or other notification for: Spectrum Health				
Account No. Jeffrey K. VanHattum, Esq. PO Box 1615 Grand Rapids, MI 49501-1615			Assignee or other notification for: Spectrum Health				
Account No. 6946 Target Corporation PO Box 038994 Tuscaloosa, AL 35403-8994		W			X		25.00

Sheet 9 of 10 Continuation Sheets attached to Schedule F

Subtotal
(Total of this page)

1,996.61(Complete only on last sheet of Schedule F) **TOTAL**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. 9532 TDS Metrocom PO Box 1007 Monroe, WI 53566-8107		W	Telephone		X		282.31
Account No. 0321 University Of Phoenix 318 River Ridge Dr. NW Walker, MI 49544		H	Tuition		X		1,444.00
Account No. University Of Phoenix C/O General Revenue Corporation 11501 Northlake Dr. Cincinnati, OH 45249			Assignee or other notification for: University Of Phoenix				
Account No.							
Account No.							
Account No.							
Account No.							

Sheet 10 of 10 Continuation Sheets attached to Schedule FSubtotal
(Total of this page)**1,726.31**(Complete only on last sheet of Schedule F) **TOTAL****29,661.86**

(Report total also on Summary of Schedules)

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests.

State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease.

Provide the names and complete addresses of all other parties to each lease or contract described.

NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

IN RE PRATT, ISAAC DARYL & PRATT, ALCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should report the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years immediately preceding the commencement of this case.

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP Daughter	AGE 7 mos
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation Factory Name of Employer Lacks How long employed 1 Week Address of Employer Grand Rapids, MI	Clerical Meijer 1 Week Walker, MI	

Income: (Estimate of average monthly income)

Current Monthly gross wages, salary, and commissions (pro rata if not paid monthly)

Estimated monthly overtime

SUBTOTAL**LESS PAYROLL DEDUCTIONS**

a. Payroll taxes and Social Security

b. Insurance

c. Union dues

d. Other (specify) _____

SUBTOTAL OF PAYROLL DEDUCTIONS**TOTAL NET MONTHLY TAKE HOME PAY**

Regular income from operation of business or profession or farm (attach detailed statement)

Income from real property

Interest and dividends

Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

Social Security or other government assistance

(Specify) _____

Pension or retirement income

Other monthly income

(Specify) _____

TOTAL MONTHLY INCOME**TOTAL COMBINED MONTHLY INCOME \$ 2,669.34** (Report also on Summary of Schedules)

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

Income is estimated as Debtors just started employment and have not received a paycheck as of the date of filing.

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)	\$	740.00
Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Utilities: Electricity and heating fuel	\$	100.00
Water and sewer	\$	
Telephone	\$	110.00
Other Cable	\$	40.00
	\$	
	\$	
Home maintenance (repairs and upkeep)	\$	
Food	\$	500.00
Clothing	\$	100.00
Laundry and dry cleaning	\$	40.00
Medical and dental expenses	\$	225.00
Transportation (not including car payments)	\$	270.00
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	50.00
Charitable contributions	\$	
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's	\$	15.00
Life	\$	
Health	\$	
Auto	\$	120.00
Other	\$	
	\$	
	\$	
Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	
	\$	
	\$	
Installment payments (in chapter 12 and 13 cases, do not list payments to be included in the plan)		
Auto	\$	
Other	\$	
	\$	
Alimony, maintenance, and support paid to others	\$	
Payments for support of additional dependents not living at your home	\$	
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
Other Misc. Expenses--Haircuts, Postage, Etc.	\$	20.00
Child Care	\$	530.00
	\$	
	\$	
	\$	

TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)**\$ 2,860.00**

(FOR CHAPTER 12 AND 13 DEBTORS ONLY)

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income	\$	
B. Total projected monthly expenses	\$	
C. Excess income (A minus B)	\$	
D. Total amount to be paid into plan each _____	\$	
	(interval)	

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

**United States Bankruptcy Court
Western District of Michigan**

IN RE:

Case No. _____

PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINEChapter **7**

Debtor(s)

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	2	7,350.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	11		29,661.86	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			2,669.34
J - Current Expenditures of Individual Debtor(s)	Yes	1			2,860.00
Total Number of Sheets in Schedules		22			
Total Assets			7,350.00		
Total Liabilities				29,661.86	

IN RE PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Case No. _____

Debtor(s)

DECLARATION CONCERNING DEBTOR'S SCHEDULES**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 23 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

(Total shown on summary page plus 1)

Date: September 28, 2005 Signature: /s/ ISAAC DARYL PRATT
ISAAC DARYL PRATT

Debtor

Date: September 28, 2005 Signature: /s/ ALYCIA CHRISTINE PRATT
ALYCIA CHRISTINE PRATT

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed or Typed Name of Bankruptcy Petition Preparer

 Social Security No.
 (Required by 11 U.S.C. § 110(c).)

Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

Signature of Bankruptcy Petition Preparer

Date

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedures may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

(Total shown on summary page plus 1)

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
Western District of Michigan**

IN RE:

Case No. _____

PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINEChapter 7

Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE (if more than one)

12,000.00 2005 - Gross income from employment/unemployment (YTD)

36,367.00 2004 - Gross income from employment

23,593.00 2003 - Gross income from employment

2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

None ☒ a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within **90 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

**Spectrum Health Hospital v.
Isaac Pratt
Case No. 05-GC-2520**

NATURE OF PROCEEDING

Collection

COURT OR AGENCY

AND LOCATION

**61st District Court, 180 Ottawa
Ave. NW, Grand Rapids, MI
49503**

STATUS OR

DISPOSITION

Default Judgment

- None ☐ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

- None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

- None ☐ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

- None ☐ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

- None ☐ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

- None ☐ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

**Mary Saur Cohn, PLLC
Bankruptcy Law Partners
3655 Alpine Ave. NW, Suite 134
Comstock Park, MI 49321-9744**

DATE OF PAYMENT, NAME OF
PAYOR IF OTHER THAN DEBTOR
9/22/05

AMOUNT OF MONEY OR DESCRIPTION
AND VALUE OF PROPERTY
500.00

\$500 = \$209 for filing fee + \$291 applied to attorney fees (owe balance of \$100 for attorney fees)

10. Other transfers

- None ☐ List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

11. Closed financial accounts

- None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, association, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None ☐ If the debtor has moved within the **two years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

**4777 Drummond Blvd. SE, Apt. 203
Kentwood, MI 49508-5194**

NAME USED

Alycia C. James

DATES OF OCCUPANCY

**2857 Central Park Way NE, Apt. 103
Grand Rapids, MI 49505**

Isaac Pratt & Alycia (James) Pratt

16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **six-year period** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None ☒ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: **September 28, 2005**

Signature /s/ ISAAC DARYL PRATT
of Debtor

ISAAC DARYL PRATT

Date: **September 28, 2005**

Signature /s/ ALYCIA CHRISTINE PRATT
of Joint Debtor
(if any)

ALYCIA CHRISTINE PRATT

0 continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

United States Bankruptcy Court
Western District of Michigan

IN RE:

Case No. _____

PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINE

Chapter 7

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verifies that the attached list of creditors is true to the best of my (our) knowledge.

Date: September 28, 2005

/s/ ISAAC DARYL PRATT

ALYCIA CHRISTINE PRATT

Joint Debtor

61st District Court
Case No. 05-GC-2520
180 Ottawa Ave. NW
Grand Rapids, MI 49503

Advanced Radiology Services PC
3264 North Evergreen Dr.
Suite 101
Grand Rapids, MI 49525

Alliance One Receivables Mgt.
PO Box 3104
Southeastern, PA 19398-3104

American Credit Educators, LLC
2000 S. Colorado Blvd.
Tower Onw, Suite 3300
Denver, CO 80222

Asset Acceptance Corp.
ATTN: DEBT COLLECTOR, LEGAL
28405 Van Dyke
Warren, MI 48093

AT&T Long Distance
C/O Risk Management Alternatives
PO Box 105816
Atlanta, GA 30348-5816

Bed Bath & Beyond
C/O Certegy Payment Recovery Serv.
PO Box 30272
Tampa, FL 33630-3272

Borgess Medical Center
C/O Comprehensive Coll. Serv.
PO Box 2503
East Lansing, MI 48826-2503

Borgess Medical Center
1521 Gull Road
Kalamazoo, MI 49048

Bronson Medical Group
C/O United Collection Bureau
5620 Southwyck Blvd.
Toledo, OH 43614

Capital One
P.O. Box 85015
Richmond, VA 23285-5015

CBCS
4764 East Fulton, Suite 101
PO Box 1615
Grand Rapids, MI 49501-1615

Centennial Wireless
C/O E R Solutions, Inc.
PO Box 9004
Renton, WA 98057-9004

Certegy Payment Recovery Services
PO Box 30031
Tampa, FL 33630-3031

Champion Fitness
C/O Credit Management Services
PO Box 250218
Franklin, MI 48025

Citizens Bank
328 S. Saginaw
Flint, MI 48502

Citizens Bank
C/O JJ Marshall & Assoc.
6060 Collection Dr.
Shelby Twp., MI 48316

Consumers Energy
C/O NCO Financial Systems
PO Box 3500
Jackson, MI 49204-3500

Consumers Energy
Box 201
Grand Rapids, MI 49501

Consumers Energy
C/O Midwestern Audit Services Inc.
PO Box 1707
Troy, MI 48099-1707

Credit Management Services
30600 Telegraph Rd., Ste. 4215
Bingham Farms, MI 48025

David W. McMorrow & Assoc. PLC
2700 Old Centre
Portage, MI 49024

E R Solutions, Inc.
PO Box 5730
Hauppauge, NY 11788-0154

Enterprise Rent-A-Car
3375 Alpine Ave. NW
Grand Rapids, MI 49544

Farook J. Kidwai MD PC
2815 Michigan Street NE
Grand Rapids, MI 49506

Fingerhut
PO Box 166
Newark, NJ 07101-0166

Fingerhut Credit Advantage
6250 Ridgewood Road
St. Cloud, MN 56303

Fingerhut Credit Advantage
C/O Midland Credit Mgt., Inc.
8875 Aero Dr., Suite 200
San Diego, CA 92123

Fitness Tech
C/O ASF International
PO Box 260360
Denver, CO 80226

Harris Publishing
360 B Street
Idaho Falls, ID 83402

HSBC Card Services
PO Box 80084
Salinas, CA 93912-0084

Hurley State Bank
PO Box 818
Gray, TN 37615

Internal Revenue Service
678 Front Street NW
Grand Rapids, MI 49504

JC Penney
P.O. Box 960001
Orlando, FL 32896-0001

Jeffrey K. VanHattum, Esq.
PO Box 1615
Grand Rapids, MI 49501-1615

John D. Bradshaw PC
PO Box 50431
Kalamazoo, MI 49005-0431

Kalamazoo Anesthesiology PC
900 Peeler St., Suite A
Kalamazoo, MI 49008

Lane Bryant
PO Box 182121
Columbus, OH 43218-2121

Lane Bryant
PO Box 659728
San Antonio, TX 78265-9728

Matchmaker International - GR
C/O Monterey Financial Services, Inc.
PO Box 2669
Carlsbad, CA 92018

Matchmaker International - GR
2450 44th St. SE, Ste. 205
Grand Rapids, MI 49512

MCI
PO Box 248
Gastonia, NC 28053

MCI Comm.
22001 Loudon County Pkwy.
Ashburn, VA 20147

Meijers
2929 Walker Ave. NW
Grand Rapids, MI 49544

Metropolitan Hospital
C/O Alliance One
PO Box 1963
Southgate, MI 48195-0963

Metropolitan Hospital
1919 Boston SE
Grand Rapids, MI 49506

Metropolitan Hospital
PO Box 159
Grand Rapids, MI 49501-0159

MICHIGAN DEPT. OF TREASURY
430 WEST ALLEGAN STREET
LANSING, MI 48922

Michigan Pain Consultants
PO Box 120070
Grand Rapids, MI 49512

Money Recovery Nationwide
801 S. Waverly Road
Suite 100
Lansing, MI 48917

MRN/NCA
PO BOX 13129
LANSING, MI 48901-3129

National Arbitration Forum
File No. FA0507000512174
PO Box 50191
Minneapolis, MN 55405-0191

NCO Financial Systems Inc.
PO Box 41457
Philadelphia, PA 19101-1457

OBGYN INC. - KALAMAZOO
C/O Allied Collection Group
PO Box 1799
Holland, MI 49422-1799

OBGYN PC
601 John St.
Kalamazoo, MI 49007

Olivet College Perkins
C/O Williams & Fudge, Inc.
PO Box 11590
Rock Hill, SC 29731-1590

Olivet College Perkins
320 S. Main St.
Olivet, MI 49076

Orchard Bank
HSBC Card Services
PO Box 5222
Carol Stream, IL 60197-5222

People Magazine
The Billing Center/Time Inc.
PO Box 60001
Tampa, FL 33660-0001

Publishers Clearing House
PO Box 26301
Lehigh Valley, PA 18002-6301

Quest Diagnostics
C/O Russell Collection Agency
PO Box 7009
Flint, MI 48507-0009

Quest Diagnostics Inc.
515 Michigan St. NE, Suite 101
Grand Rapids, MI 49503

Risk Management Alternatives, Inc.
1500 Commerce Drive
Mendota Heights, MN 55120-1025

SBC
PO Box 5072
SAGINAW, MI 48605-5072

Specialized Card Services
C/O Bankruptcy Law Partners
3655 Alpine Ave. NW, Ste. 134
Comstock Park, MI 49321

Spectrum Health
P.O. Box 2127
Grand Rapids, MI 49501-2127

Target Corporation
PO Box 038994
Tuscaloosa, AL 35403-8994

TDS Metrocom
PO Box 1007
Monroe, WI 53566-8107

University Of Phoenix
C/O General Revenue Corporation
11501 Northlake Dr.
Cincinnati, OH 45249

University Of Phoenix
318 River Ridge Dr. NW
Walker, MI 49544

**United States Bankruptcy Court
Western District of Michigan**

IN RE:

Case No. _____

PRATT, ISAAC DARYL & PRATT, ALYCIA CHRISTINEChapter 7

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ **391.00**

Prior to the filing of this statement I have received \$ **291.00**

Balance Due \$ **100.00**

2. The source of the compensation paid to me was: ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is: ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
 - e. [Other provisions as needed]

See attached Contract for Legal Services.

6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

See attached Contract for Legal Services.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

September 28, 2005

Date

/s/ Mary Saur Cohn

Signature of Attorney

Mary Saur Cohn, PLLC Bankruptcy Law Partners

Name of Law Firm